

HUSBAND

Born _____ Place _____
 Chr. _____ Place _____
 Marr. _____ Place _____
 Died _____ Place _____
 Bur. _____ Place _____

HUSBAND'S FATHER

HUSBAND'S OTHER WIVES

(DPM)

Husband

Wife

Ward

Examiner

Stake

Mission

HUSBAND'S
MOTHER**WIFE**

Born _____ Place _____
 Chr. _____ Place _____
 Died _____ Place _____
 Bur. _____ Place _____

WIFE'S FATHER

WIFE'S OTHER
HUSBANDSWIFE'S
MOTHER**CHILDREN**

List each child (whether living or dead) in order of birth

Given Names Surname

WHEN BORN**WHERE BORN****DATE OF FIRST MARRIAGE**

TO WHOM

| SEX M F | DAY | MONTH | YEAR | TOWN | COUNTY | STATE OR COUNTRY | DATE OF FIRST MARRIAGE TO WHOM |
|---------------|-----|-------|------|------|--------|---------------------|-----------------------------------|
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | | | | | | | |
| 9 | | | | | | | |
| 10 | | | | | | | |
| 11 | | | | | | | |

SOURCES OF INFORMATION

OTHER MARRIAGES

ENTER ALL DATA IN THIS ORDER:

DATES: 14 Apr 1794

To indicate that a child is an ancestor of the person submitting the sheet, place an "X" behind the number pertaining to that child.

FAMILY
GROUP
RECORD

Scott M

SOULIER

DR. SCOTT M. SOULIER
&
DR. JEFFREY C. PAGE
Podiatrists

Announce the expansion of their practice in Heber
 Treating
**Diseases, Injuries and Surgery
 of the Foot and Ankle**

570 East Center
 Heber City

THURSDAYS ONLY
 654-0331

Wave 22 Dec 1984

JANET R. KELLY, M.D.
 DIPLOMATE, AMERICAN BOARD OF FAMILY PRACTICE

ANNOUNCES THE OPENING OF HER OFFICE

FOR THE PRACTICE OF
 FAMILY MEDICINE

AT

570 EAST CENTER STREET
 HEBER CITY, UTAH 84032

OFFICE HOURS
 MON., TUES., WED., FRI.
 9:00 A.M.-5:00 P.M.
 THURS. 9:00 A.M.-12:00 NOON

TELEPHONE
 (801) 654-0331

SCOTT M. SOULIER, D.P.M.
 JEFFREY C. PAGE, D.P.M.

WILL EXTEND THEIR PRACTICE OF PODIATRIC MEDICINE
 AND SURGERY TO HEBER CITY, AT THE ABOVE ADDRESS.

OFFICE HOURS THURS. 1:00-5:00 P.M.